

Tailored Transitions Ltd

Fernside

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Fernside is a small residential care home without nursing that provides support for up to 4 people aged 18-65 with complex medical, physical and learning needs. It is located in a purpose-built bungalow with a large level access garden. At the time of our inspection the home was providing support to 4 people.

People's experience of using this service and what we found

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

Right Support:

People who were able to, told us they felt safe and happy at the home. People looked happy, calm, and content when spending time with staff. Relatives and health professionals felt people were well cared for and safe. A familiar and consistent group of care staff meant they knew people well.

Risks to people were assessed and regularly reviewed. Positive risk taking was encouraged.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

Right Care:

People could communicate with staff and understand information given to them because staff supported them consistently and understood their individual communication needs. Staff demonstrated a good understanding of the signs and symptoms that may indicate a person is experiencing poor care and abuse and knew how to report this appropriately. They felt confident appropriate and timely action would be taken by the registered manager. People received their prescribed medicines appropriately from trained staff and had regular reviews to ensure they remained effective.

Right Culture:

There was an open, supportive and homely culture at Fernside. Staff felt supported by management and their colleagues. They were encouraged to take on new skills and qualifications to help further improve the care people received. Relatives and professionals spoke highly of the registered manager who they saw as approachable, receptive and engaged with securing good outcomes for people. The home worked well with other organisations such as GP surgeries, day centres, epilepsy team and physiotherapists.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk.

Rating at last inspection

The last rating for this service was good (published 12 April 2018).

Why we inspected

This inspection was prompted by a review of the information we held about this service. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

The overall rating for the service has remained good based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Fernside on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

The five questions we ask about services and what we found

We always ask the following five questions of services.

<p>Is the service safe?</p> <p>The service was safe.</p> <p>Details are in our safe findings below.</p>	<p>Good ●</p>
<p>Is the service well-led?</p> <p>The service was well-led.</p> <p>Details are in our well-led findings below.</p>	<p>Good ●</p>

Fernside

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

The inspection was carried out by 1 inspector.

Service and service type

Fernside is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Fernside is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

We gave the service 24 hours' notice of the inspection. This was because the service is small and we wanted to be sure there would be people at home to speak with us.

Inspection activity started on 17 October 2023 and ended on 20 October 2023. We visited the service on 17 and 19 October 2023.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke and interacted with all 4 people who lived at the service. We contacted 4 relatives about their experience of the care provided. We spoke with and received written feedback from 7 members of staff including the registered manager, team leaders, complex care workers and housekeeping. We received written feedback from 3 health professionals.

We reviewed a range of records. This included 4 people's care records such as risk assessments and a sample of medication records. We looked at 3 staff files in relation to recruitment. A variety of records relating to the management of the service, including policies and procedures were reviewed.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question good. At this inspection the rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People told and showed us they felt safe and happy at the home. We spoke and interacted with all 4 people living at Fernside. People looked happy, calm and content in staff company. Mutual affection was observed during interactions between people and staff. Before our visit, relatives advised us how their family members displayed being content and happy. We observed these signs during the inspection. A relative said, "For me Fernside is care as it should be."
- Relatives told us they felt their family members were safe. Their comments included: "[Name] is utterly safe there", "[Name] is safe definitely", "I have every confidence in the ability of the staff to care for [name] safely" and, "[Name] is absolutely safe there, is so well looked after. All family and friends haven't seen [name] look so well."
- People were supported by staff who had a good understanding of the signs and symptoms that could indicate a person was experiencing harm or abuse. Staff knew how to raise concerns internally and to external agencies such as the local authority and CQC.
- Staff told us they would feel confident whistleblowing if they observed or heard about poor practice. They felt confident they would be listened to, and action taken in a timely way if they raised concerns.

Assessing risk, safety monitoring and management

- People's individual risks were known and well managed without being unduly restrictive. Risk assessments included the following areas of people's lives: moving and repositioning, falls, choking, use of bed sides and going out. Positive risk taking was encouraged. A relative said, "They manage [name's] risks whilst encouraging [them] to do as much as [they] can." A staff member shared, "Staff are given daily handovers when they arrive on shift so important information is shared."
- Where people had been known to express emotional distress, they had personalised support guidelines to help staff identify the triggers and support them to mitigate risks.
- Staff managed the safety of the home and equipment in it through checks and follow up action to reduce risk.
- Risks to people from fire had been minimised. Fire safety records evidenced regular fire drills, equipment tests and servicing. In addition, people had personalised evacuation plans that detailed how they should be supported in the event of an emergency such as a fire.

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The MCA requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty. Any conditions related to DoLS authorisations were being met.

Staffing and recruitment

- There were enough staff to meet people's needs with people supported by a consistent group of staff who knew them well. Relative comments included, "They have regular staff all who know people well" and "[The provider] does such a good job of recruitment."
- The home had safe recruitment practices including checks with the Disclosure and Barring Service (DBS). DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- People were supported to receive their medicines safely. Spot checks took place to help ensure safe practice. A staff member said, "Spot checks are important to keep the standards high."
- Staff giving medicines had been appropriately trained and had their competency assessed.
- GP medication reviews were requested to ensure people were on the most beneficial medicines for their needs and were not over medicated. A relative told us, "If something is not working correctly with [name's] medication they get relevant professionals involved to deal with it."

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises. The home was visibly clean and hygienic throughout. Relatives commented positively about the cleanliness. For example a relative said, "The place is always spotlessly clean."
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.
- People were able to receive visitors without restrictions in line with best practice guidance. A relative said, "We can visit anytime - it's an open door policy."

Learning lessons when things go wrong

- Post incident support and review took place with learning shared with staff to help prevent a re-occurrence.
- Relatives told us they were kept updated if accidents or incidents occurred.
- Staff told us sufficient time was given to debrief and learn from incidents during handovers, supervision and staff meetings. A staff member said, "If an emergency or challenging situation occurs, there is always a debrief by the senior team following the incident. Management and team leaders are always approachable, and you can discuss any concerns you have with them."

Is the service well-led?

Our findings

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At our last inspection we rated this key question good. At this inspection the rating for this key question has remained good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- There was a positive, lively and open culture at the service. The culture was modelled by the registered manager and staff team. The provider arranged external team building days to foster working relationships and a one-team ethos.
- Staff felt appreciated and supported by the management. Team colleagues got on well and said they were proud to work at Fernside. Staff comments included: "Management, the senior team and other staff members support each other and always give positive feedback to each other", "I really enjoy working for the company, I feel very proud to work for [them]", "I love working here and miss everyone when I'm on holiday or days off."
- Relatives, staff and professionals felt the home was well managed and spoke positively about the registered manager. All 4 people looked happy and calm in the registered manager's presence. A relative said, "The home always runs like clockwork. It's a home from home." A staff member shared, "[Name of registered manager] is always there to listen to problems, and makes changes where required to support staff. They create a happy, upbeat and positive environment and it's a pleasure to work for them." A professional said, "[Name of registered manager] is a very good manager."
- The registered manager spoke positively about her team telling us, "I think they are all different which is a wonderful thing. The team work really well together. I have a lot of faith in them."
- The registered manager felt supported by the provider. They said, "[Names of provider managers] are wonderful. I started here June 2022. They understand a happy staff team is a happy home."
- The provider had a clear management structure that monitored the quality of care to drive improvements in service delivery.
- The registered manager had a good understanding of CQC requirements, in particular, to notify us, and where appropriate the local safeguarding team, of incidents including potential safeguarding issues, disruption to the service and medication errors resulting in harm. This is a legal requirement.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The registered manager had a good understanding of the duty of candour. They told us, "It means being transparent, honest and open. It very much should be the culture of somewhere. Then we are more able to assess things and why they happened, staff are then more open rather than trying to cover things up. If something happens that's wrong, we need to own up to it. I would say what happened and what measures

are going to be put in place. Give an explanation why something happened and apologise."

Continuous learning and improving care

- Various audits were undertaken which included reviews of medication, infection control, care plans, property maintenance and fire safety. Results were used to drive improvement.
- Staff felt their hard work was recognised. A staff member said, "Our years of service are celebrated, and we are given a small gift at Christmas. We also have a wellbeing drawer of snacks provided by the provider and a 'shout out box' where we can appreciate what other staff have done by writing it on a piece of paper." Relatives had also noticed the support provided to staff when telling us, "They manage their staff really well. They appreciate their staff and recognise their skills."
- The provider had created a learning culture at the service which improved the care people received. This included providing flexible shifts to facilitate studying. A staff member said, "[The registered manager and provider] have helped me to learn new skills and knowledge and given me opportunities to develop as a person." A relative said, "There is regular CPD [Continuous Professional Development] training for example, epilepsy awareness."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- People and staff were involved in the running of the service and fully understood and took into account and appreciated their differences.
- People and relatives were sought on an ongoing basis and via annual satisfaction surveys with feedback used to improve the service people received. Relative comments included: "They have given me a questionnaire. They asked us down to Fernside to give input into the garden redesign", "We have a formal review with [name of registered manager] every 6 months but they also get in touch with us monthly to check we're happy with everything" and, "We have nothing but praise and gratitude for the team at Fernside."
- The service worked in partnership with others to help ensure good outcomes for people. This included positive working relationships with GP surgeries, dieticians, epilepsy team and physiotherapists.